

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000036481 (8)

1. Corporation Name
CLUB MUSIC, INC.

Principal Place of Business
8908 MATHOG ROAD
RIVERVIEW FL 33569

Mailing Address
P. O. BOX 1308
RIVERVIEW FL 33568-1308



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/17/1993	3a. Date of Last Report 07/16/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-3250975		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

RICE, STEVEN K
8908 MATHOG ROAD
RIVERVIEW FL 33569

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

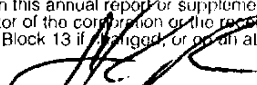
(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P RICE, STEVEN K 8908 MATHOG RD. RIVERVIEW FL 33569	1.1 TITLE	☐ Change ☐ Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	V GLEATON, WILLIAM F 8908 MATHOG RD. RIVERVIEW FL 33569	2.1 TITLE	☒ Change ☐ Addition
NAME		2.2 NAME	RONNIE L. GLASS
STREET ADDRESS		2.3 STREET ADDRESS	5221 SHAKESPEARE ROAD
CITY-ST-ZIP		2.4 CITY-ST-ZIP	DOVER, FL 33527
TITLE	S RICE, CARRY S 8908 MATHOG RD. RIVERVIEW FL 33569	3.1 TITLE	☒ Change ☐ Addition
NAME		3.2 NAME	CAREY S. RICE
STREET ADDRESS		3.3 STREET ADDRESS	8908 MATHOG RD.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	RIVERVIEW, FL 33569
TITLE	T GLASS, RONNIE L 5221 SHAKESPEARE ROAD DOVER FL 33527	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the registered agent or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE



CARRY S. RICE

4/12/97

(P.O.) 33569

CR2E034 (9/96)